SUPPLEMENTAL APPLICATION DATA SHEET

APPLICATION INFORMATION

Application Number:: 10/594,993
Application Date:: 09/29/06
Application Type:: REGULAR
Subject Matter:: UTILITY
CD-ROM or CD-R?:: NONE

Title:: COMPUTERIZED PROTECTION

SYSTEM AND METHOD FOR AUTOMATICALLY IDENTIFYING AND/OR CHARACTERIZING RISK

PARAMETERS

Attorney Docket Number:: 297169US28PCT CIP

Total Drawing Sheets:: 5

INVENTOR INFORMATION

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: Canada

Status:: FULL CAPACITY

Given Name:: Dieter Middle Name:: S.

Family Name:: GAUBATZ
City of Residence:: Fort Wayne
State or Province of Residence:: Indiana

Country of Residence:: United States of America Street of Mailing Address:: 3024 Emerald Lake Drive

City of Mailing Address:: Fort Wayne State or Province of Mailing Address:: Indiana

Country of Mailing Address:: United States of America

Postal or Zip Code of Mailing Address:: 46804

Applicant Authority Type:: INVENTOR

Primary Citizenship Country:: United States of America

Status:: FULL CAPACITY

Given Name:: Edward

Middle Name:: J.

Family Name:: WRIGHT
City of Residence:: Fort Wayne
State or Province of Residence:: Indiana

Country of Residence:: United States of America

Street of Mailing Address:: Currie Hill Street
City of Mailing Address:: Fort Wayne
State or Province of Mailing Address:: Indiana

Country of Mailing Address:: United States of America

Postal or Zip Code of Mailing Address:: 46804

Applicant Authority Type:: INVENTOR

Primary Citizenship Country:: United States of America

Status:: FULL CAPACITY

Given Name:: Tracy Middle Name:: A.

Family Name:: CHOKA
City of Residence:: Fort Wayne
State or Province of Residence:: Indiana

Country of Residence:: United States of America

Street of Mailing Address::

City of Mailing Address::

State or Province of Mailing Address::

Indiana

Country of Mailing Address:: United States of America

Postal or Zip Code of Mailing Address:: 46807

Applicant Authority Type:: INVENTOR

Primary Citizenship Country:: United States of America

Status:: FULL CAPACITY

Given Name:: James
Middle Name:: P.

Family Name:: EUBANKS
City of Residence:: Fort Wayne
State or Province of Residence:: Indiana

Country of Residence:: United States of America
Street of Mailing Address:: 2022 Ardmore Road, Apt. 104

City of Mailing Address:: Fort Wayne State or Province of Mailing Address:: Indiana

Country of Mailing Address:: United States of America

Postal or Zip Code of Mailing Address:: 46802

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 22850

REPRESENTATIVE INFORMATION

Representative Customer Number:: 22850

DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/EP04/051830	08/18/04
PCT/EP04/051830	Continuation-in-Part	10/816,120	04/01/04

FOREIGN PRIORITY INFORMATION

ASSIGNMENT INFORMATION

Assignee Name:: Swiss Reinsurance Company

Street of Mailing Address:: Mythenquai 60

City of Mailing Address:: Zuerich
Country of Mailing Address:: Switzerland
Postal or Zip Code of Mailing Address:: CH-8002